

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PERMITS OFFICE	

OIL CONSERVATION DIVISION  
P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-104  
Revised 10-01-78  
Format 06-01-83  
Page 1

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. **Operator**  
Union Texas Petroleum Corporation

**Address**  
P. O. Box 1290, Farmington, New Mexico 87499

**Reason(s) for filing (Check proper box)**

<input type="checkbox"/> New Well	Change in Transporter of: <input checked="" type="checkbox"/> Oil <input type="checkbox"/> casinghead Gas	<input type="checkbox"/> Dry Gas <input type="checkbox"/> Condensate
<input type="checkbox"/> Recompletion		
<input type="checkbox"/> Change in Ownership		

**Other (Please explain)**

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

<b>Lease Name</b> Zachry	<b>Well No.</b> 35	<b>Pool Name, Including Formation</b> Armenta Gallup	<b>Kind of Lease</b> State, Federal or Fee	<b>Lease No.</b> 080724-A
<b>Location</b>				
Unit <u>0</u> : <u>990</u> Feet From The <u>South</u> Line and <u>1845</u> Feet From The <u>East</u>				
Line of Section <u>10</u> Township <u>28N</u> Range <u>10W</u> , NMPM, <u>San Juan</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

<b>Name of Authorized Transporter of Oil</b> <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Gary Energy Corporation	<b>Address (Give address to which approved copy of this form is to be sent)</b> P. O. Box 489, Bloomfield, N.M. 87413
<b>Name of Authorized Transporter of Casinghead Gas</b> <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Union Texas Petroleum Corporation	<b>Address (Give address to which approved copy of this form is to be sent)</b> P. O. Box 1290, Farmington, N.M. 87499
<b>If well produces oil or liquids, give location of tanks.</b>	<b>Is gas actually connected?</b>
Unit <u>0</u> Sec. <u>10</u> Twp. <u>28N</u> Rge. <u>10W</u>	Yes

If this production is commingled with that from any other lease or pool, give commingling order number

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given is true and complete to the best of my knowledge and belief.

Kenneth E. Roddy  
Kenneth E. Roddy (Signature)  
Area Production Superintendent

10/5/84

(Title)

(Date)

OIL CONSERVATION DIVISION

APPROVED NOV 01 1984, 19  
BY [Signature]  
TITLE SUPERVISOR DISTRICT # 8

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allowable on new and recompleted wells.

Fill out only Sections I, II, and VI for changes of owner, well name or number, or transportation; other such change of condition.

Separate Forms C-104 must be filed for each pool in multiply completed wells.

**RECEIVED**  
OCT 10 1984

OIL CON. DIV.  
DIST. 3